2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000022144

1. Entity Name
EASTLAND PARTNERS, LLC



Principal Place of Business

CITY-ST-ZIP

13361 ATLANTIC BOULEVARD JACKSONVILLE, FL 32225 Mailing Address

13361 ATLANTIC BOULEVARD JACKSONVILLE, FL 32225

FILED Feb 05, 2004 8:00 am Secretary of State

02-05-2004 90078 014 ****50.00

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01232004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3708378

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CFRA, LLC 777 SOUTH HARBOR ISLAND BOULEVARD 5TH FLOOR TAMPA, FL 33602-5730

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE_	Signature, typed or printed name of registered agent and little if applicable. (NO	E: Registered Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2004		
9	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BARTRAM INVESTMENTS, LLC 13361 ATLANTIC BLVD JACKSONVILLE, FL 32225	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		

11... I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.